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Application Number	10/619,384
Filing Date	07-14-2003
First Named Inventor	M. Corson, Scott
Art Unit	2619
Examiner Name	LEE, BETTY E
Attorney Docket Number	060556

I hereby revoke all previous powers of attorney given in the above-identified application.

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☒ I hereby appoint the practitioners associated with the Customer Number:

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

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Date

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.

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